

FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

Title of Invention	[ELECTROSTATIC DISCHARGE PROTECTION DEVICE]																					
Application Number : Date : First Named Applicant: Mr. Shiao-Shien Chen Attorney Docket Number: 14217-US-PA-X																						
TOTAL FEE AUTHORIZED \$ 770																						
Patent fees are subject to annual revisions on or about October 1st of each year.																						
Filing as large entity																						
BASIC FILING FEE																						
<table border="1"><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr><tr><td>Utility Filing Fee</td><td>1001</td><td>770</td><td>770</td></tr><tr><td colspan="4">Subtotal For Basic Filing Fees: \$ 770</td></tr></table>				Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	1001	770	770	Subtotal For Basic Filing Fees: \$ 770										
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EXTRA CLAIM FEES																						
<table border="1"><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr><tr><td>Total Claims : 19</td><td>0</td><td>1202</td><td>18</td><td>0</td></tr><tr><td>Independent Claims : 2</td><td>0</td><td>1201</td><td>86</td><td>0</td></tr><tr><td colspan="4">Subtotal For Extra Claims Fees: \$ 0</td></tr></table>				Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$	Total Claims : 19	0	1202	18	0	Independent Claims : 2	0	1201	86	0	Subtotal For Extra Claims Fees: \$ 0			
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Subtotal For Extra Claims Fees: \$ 0																						
AUTHORIZED BILLING INFORMATION																						
The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:																						
Credit account number:	1000																					
Expiration Date (YYYYMMDD):	2006-10-31																					
Authorized name:	LEE, HUAI-LU																					
Billing address:	99999																					